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**APPLICANTS**  
 C. Brian Atkins, Mountain View, CA;  
 Jay Stephen Gondek, Camas, WA;

**\*\* CONTINUING DATA \*\*\*\*\*** *DR*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *DR*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 04/03/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>DR</i> Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>DR</i>	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**  
 HEWLETT-PACKARD COMPANY  
 Intellectual Property Administration  
 P. O. Box 272400  
 Fort Collins, CO80527-2400

**TITLE**  
 Digital image appearance enhancement and compressibility improvement method and system

<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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